RECORD OF REQUEST FOR PURCHASE OF POLITICAL TIME CANDIDATE OR ISSUE

(COMPLETED FORM TO BE SENT AT TIME OF ORDER AND WILL BE PLACED IN POLITICAL/ PUBLIC INSPECTION FILE)

1. Date of Request: 10/10/14 2. Requestor: Beth Beall
3. Address of Person making the Request: 210 W PENNSY VANIA Ave Suize 75070 USOn Mi) 4. Telephone Number of Person making the request: 410 825 7034
Name of Candidate: Cecilia House Name of Candidate's Authorized Committee: Frends of Cecilia House Name of Treasurer of Candidate's Committee: KATELYN BIAWN Legally Qualified Candidate for Office of RA STATE Senate ***PLEASE ATTACH REQUESTED SCHEDULE OF TIME***
PRIMARY ELECTION Democrat Republican Other
GENERAL ELECTION Democrat Republican Other
CAUCUS Democrat Republican Other
Issue/Advocacy Ads:
Name of Organization Buying Time:
Issue of National Importance: Yes No
Describe Content of Issue Ad (complete 5 above if a Candidate is mentioned in Ad):
Attach Names and Addresses of Chief Executive Officers, Executive Committee or Board of Directors
Name of Candidate: Candidate's Party Affiliation: Office Sought by Candidate: 8. Request to Purchase Time: ACCEPTED IN WHOLE ACCEPTED IN PART REJECTED 10. If request to purchase time is ACCEPTED (in whole or in part) from Candidate or from an issue/advocacy advertiser and the advertisement relates to an issue of national importance attach a copy of (i) the Insertion Order (including schedule or time purchased, rates charged, class of time purchased), (ii) Invoice, and (iii) Affidavit of Performance indicating dates and times the advertisement aired and place in the Political File. If request to purchase time is ACCEPTED (in whole or in part) from an issue/advocacy advertiser and the advertisement relates to all other political issues place only the Record of Request in the Political File.
Signed: Date: /9/10/16 Name: Part Dall Nec for Compast Position: As
Send this ROR to omc_political@cable.comcast.com when you submit an order

DMA-Johnstown ZONES-POR, JHN

AGREEMENT FORM FOR POLITICAL CANDIDATE ADVERTISEMENTS

(check applicable box)

☐ FEDERAL CANDIDATE

M STATE/LOCAL CANDIDATE

To Avail Themselves Of The Lowest Unit Charge During A Political Window, Federal Candidates Must Sign The Certification On Page 3

Station an	d Location:			Date:	
_{I,} Katelyn	Brawn			Service of James Service	
	half of: Cecilia	a Houser			
a legally qua	alified candidate	of the Rep	ublican		
political par	ty for the office o	State F	Represen	tative	
in the Ger	neral				
election to b	ne held on: 11/8	3/16			
	equest station tin		S :		
Broadcast Length	Time of Day, Rotation or Package	Days	Class	Times per Week	Number of Weeks
	varies				
Attach prop	osed schedule w	ith charges (if available):		gross

FEDERAL CANDIDATE CERTIFICATION

In Order For Federal Candidates To Receive The Lowest Unit Charge During A Political Window, The Following Certification is Required:

1. Frends of Cecilian Houser - A state/local level committee
(name of federal candidate or authorized committee) hereby certify that the
programming to be broadcast (in whole or in part) pursuant to this agreement:
☐ does not
refer to an opposing candidate (check applicable box). I further certify that for the programming that does refer to an opposing candidate:
(check applicable box)
the radio programming contains a personal audio statement by the candidate that identifies the candidate, the office being sought, and that the candidate has approved the broadcast.
the television programming contains a clearly identifiable photograph or similar image of the candidate for a duration of at least four seconds, and a simultaneously displayed printed statement identifying the candidate, that the candidate approved the broadcast, and that the candidate and/or the candidate's authorized committee paid for the broadcast.
Cecilia E. Hower
signature of candidate or authorized committee
Cecite Houser 9/20/16 printed name date

NAB Form PB-18 Candidates				
Issues of importance to Cambria County.				
A Local / State Level Me.				
I represent that the payment for the above described broadcast time has been furnished				
by:				
Friends of Cacilia Houser				
and you are authorized to announce the time as paid for by such person or entity. I represent that this person or entity is either a legally qualified candidate or an authorized committee/organization of the legally qualified candidate.				
The name of the treasurer of the candidate's authorized committee is:				
ADAM MURPHY				
This station has disclosed to me its political advertising policies, including: applicable classes and rates; and discount, promotional and other sales practices (not applicable to federal candidates).				
THIS STATION DOES NOT DISCRIMINATE OR PERMIT DISCRIMINATION ON THE BASIS OF RACE OR ETHNICITY IN THE PLACEMENT OF ADVERTISING.				
To Be Signed By Candidate or Authorized Committee				
9/20/16 Hanly				
Date Signature				
To Be Signed By Station Representative				
Accepted Accepted in Part Rejected				
110 - 11 1 1 1 1 1 1				
Vironica Bret SSSS Signature Printed Name Title				
- General Communication (Communication)				
DMA-Johnstoun				

ZONES-POR, JHN



Political Client Information Request Form

Candidate Name:	Cecilia Houser	
Official Campaign Name:	Friends of Cecilia Houser	
Address:	739 NONTO SPRUCE ST.	
City, State & Zip Code:	EBENSBURC, PA 1593	
Campaign Phone:	717-307-5501	
Campaign Fax:	The state of the s	
Campaign Contact Person:	JAKE FELKER	
Campaign Treasurer:	AREN MURPHU	

